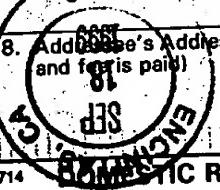


Is your RETURN ADDRESS completed on the reverse side?	
SENDER: <ul style="list-style-type: none"> • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered. 	I also wish to receive the following services (for an extra fee): <ul style="list-style-type: none"> <input type="checkbox"/> Addressee's Address <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Consult postmaster for fee.
3. Article Addressed to: <p style="text-align: center;"><i>Dr. Ann Monosov 1715 Edgefield Lane ENCINITAS, CA 92024 - 1977</i></p>	4a. Article Number <p style="text-align: center;"><i>P 885 907 685</i></p>
5. Signature (Addressee) <p style="text-align: center;"><i>A. MONOSOV</i></p>	4b. Service Type <ul style="list-style-type: none"> <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise
6. Signature (Agent)	7. Date of Delivery <p style="text-align: center;">08/08/91</p>
8. Addressee's Address (Only if requested and fees is paid)	
 PS Form 3811, December 1991 *U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT	

Thank you for using Return Receipt Service.